

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 FEB 10 PM 4:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000090814**

1. Corporation Name

Today's Man Outlet, Inc.

Principal Place of Business

Sawgrass Mills, Space 917
Sunrise, FL 33323

Mailing Address

835 Lancer Street
Moorestown, NJ 08057

REINSTATEMENT

97-99
00

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

12-15-94

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0553038

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P&AS	Frank E. Johnson	835 Lancer Street	Moorestown, NJ 08057
D	Frank E. Johnson	835 Lancer Street	Moorestown, NJ 08057
Sec., VP&T	Barry Pine	835 Lancer Street	Moorestown, NJ 08057
D	Barry Pine	835 Lancer Street	Moorestown, NJ 08057
			500002773405-7
			-02/11/99-01088-004
			***1050.00 ***1050.00

8. Name and Address of Current Registered Agent

C T Corporation System
1200 South Pine Island Road
Plantation, FL 33324

9. Name and Address of New Registered Agent

Name
Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street
Suite, Apt. #, Etc

City
Tallahassee

State Zip Code
FL 32301

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent By: Tabatha F. Fiorelli-Assst VP
REGISTERED AGENT MUST SIGN

Date Feb 9, 1999

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S. that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Barry S. Pine, Vice Pres. & Treasurer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

December 23, 1998 609-722-6592
Date Daytime Phone #